

Work Order ID 86946

July-09-12 2:57:06 PM

86946

Page 1

Item ID: D3306-041 Accept ***N9000040100*** Setup Start ***NS1***
 Revision ID: Stop ***NS2***
 Item Name: Cover Assembly
 Start Date: 7/09/12 Start Qty: 20.00 ***20*** Cust Item ID:
 Required Date: 8/03/12 Req'd Qty: 20.00 ***20*** Customer:
 Reference:

Approvals: Process Plan: MLJ Date: 12/07/10 Tooling: _____ Date: _____
 QC: _____ Date: _____ SPC (Y/N): _____ Date: _____
 Run Start ***NR1***
 Stop ***NR2***

| Sequence ID/ Work Center ID | Operation Description | Set Up/ Run Hours | Tool ID | Tool # | Plan Code | Accept Qty | Reject Qty | Reject Number | Insp. Stamp |
|--------------------------------|--------------------------|----------------------|---------|--------|--------------|---------------|---------------|------------------|----------------|
|--------------------------------|--------------------------|----------------------|---------|--------|--------------|---------------|---------------|------------------|----------------|

| Draw Nbr | Revision Nbr |
|----------|--------------|
| D3306 | Rev B |

100 PURCHASING 0.00
100
 Purchasing Memo 0.00
 Purchasing Issue P/O: 17409 Manufacture as per Dwg D3306Possible
 Supplier: Aerotex InteriorsMaterial release note is required

12-07-10
20

110 Receive & Inspect for Damage & Mat'l Certs 0.00
110
 Packaging Memo 0.00
 Packaging Ensure Material Release Note is attached

CL 13/02/07 10

120 QC6- Inspect dimensions to drawing 0.00
120
 QC Memo 0.00
 Quality Control

8/3/2/7

| W/O: | | WORK ORDER CHANGES | | | | | | |
|------|------|--------------------|----|------|-----|-------------------------------------|--------------------------|--|
| DATE | STEP | PROCEDURE CHANGE | By | Date | Qty | Approval Chief Eng / Prod Mgr | Approval QC Inspector | |
| | | | | | | | | |
| | | | | | | | | |

Part No: _____ PAR #: _____ Fault Category: _____ NCR: Yes No DQA: _____ Date: _____

Resolution: _____ Disposition: _____ QA: N/C Closed: _____ Date: _____

| NCR: | | WORK ORDER NON-CONFORMANCE (NCR) | | | | | | |
|------|------|----------------------------------|-----------------------------|---------------------------------|----------------|---------------------------|-----------------------|--------------------------|
| DATE | STEP | Description of NC Section A | Corrective Action Section B | | | Verification Section C | Approval Chief Eng | Approval QC Inspector |
| | | | Initial Chief Eng | Action Description Chief Eng | Sign & Date | | | |
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NOTE: Date & initial all entries

Work Order ID 86946

86946

Page 2

July-09-12 2:57:06 PM

Item ID: D3306-041 Accept ***N900040100*** Setup Start ***NS1***
Revision ID: Stop ***NS2***
Item Name: Cover Assembly
Start Date: 7/09/12 Start Qty: 20.00 ***20*** Cust Item ID:
Required Date: 8/03/12 Req'd Qty: 20.00 ***20*** Customer:
Reference:

Approvals: Process Plan: _____ Date: _____ Tooling: _____ Date: _____ Run Start ***NR1***
QC: _____ Date: _____ SPC (Y/N): _____ Date: _____ Stop ***NR2***

| Sequence ID/ Work Center ID | Operation Description | Set Up/ Run Hours | Tool ID | Tool # | Plan Code | Accept Qty | Reject Qty | Reject Number | Insp. Stamp |
|--------------------------------|--|----------------------|---------|--------|--------------|---------------|---------------|------------------|----------------|
| 130 | Identify as per dwg & Stock Location: <i>ST186</i> | 0.00 | | | | | | | |
| *130* | | | | | | | | | |
| Packaging | Memo | 0.00 | | | | | | | |
| Packaging | | | | | | | | | |
| 140 | QC21- Final Inspection - Work Order Release | 0.00 | | | | | | | |
| *140* | | | | | | | | | |
| QC | Memo | 0.00 | | | | | | | |
| Quality Control | | | | | | | | | |

CL 13/02/07

13/2/11

CL 13/02/07

| W/O: | | WORK ORDER CHANGES | | | | | | |
|------|------|--------------------|----|------|-----|-------------------------------------|--------------------------|--|
| DATE | STEP | PROCEDURE CHANGE | By | Date | Qty | Approval Chief Eng / Prod Mgr | Approval QC Inspector | |
| | | | | | | | | |
| | | | | | | | | |

Part No: _____ PAR #: _____ Fault Category: _____ NCR: Yes No DQA: _____ Date: _____

Resolution: _____ Disposition: _____ QA: N/C Closed: _____ Date: _____

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| | | | Initial Chief Eng | Action Description Chief Eng | Sign & Date | | | |
| | | | | | | | | |
| | | | | | | | | |
| | | | | | | | | |

NOTE: Date & initial all entries

D3306-11 BOTTOM

D3306-7 TAB
3 PL

D3306-9 BOTTOM

0.13^{+0.1}_{-0.0}
TYPD3306-3
BOTTOM

D3306-5 SIDE

8

D3306-1 TOP

D3306-041 COVER ASSEMBLY**NOTES:**

- 1) MATERIAL: SEE PAGE 2 AND 3
- 2) FINISH: NONE
- 3) TOLERANCES: PER DART QSI 018 UNLESS OTHERWISE NOTED
- 4) UNITS: INCHES UNLESS OTHERWISE NOTED
- 5) BREAK SHARP EDGES: N/A
- 6) IDENTIFICATION: N/A
- 7) WEIGHT: 0.09 lbs
- 8) THREAD: MIL-VT-295 TYPE II CLASS A, GREY NYLON THREAD, 4-6 STITCHES PER INCH
USE 1/2" MIN BACKSTITCH, NO LOOSE THREADS
- 9) POSSIBLE SUPPLIER: AEROTEX INTERIORS INC.

| QTY -041 | PART NUMBER | DESCRIPTION |
|-------------|-------------|----------------|
| X | D3306-041 | COVER ASSEMBLY |
| 1 | D3306-1 | TOP |
| 1 | D3306-3 | BOTTOM |
| 1 | D3306-5 | SIDE |
| 3 | D3306-7 | TAB |
| 1 | D3306-9 | BOTTOM |
| 1 | D3306-11 | BOTTOM |



SHOP COPY
RETURN TO
ENGINEERING
UNCONTROLLED COPY
SUBJECT TO AMENDMENT
WITHOUT NOTICE
WORK ORDER
NO. 86946 MCT
12/07/10

RELEASE
08-10-10

| | | | |
|------------|--|---|--------------|
| B | UPDATE MATERIAL (REV A1) (ZN A6-2, A6-3); BOTTOM IS NOW 3 PIECES (-3/-9/-11) (ZN D3-1); HOOK AND LOOP REVERSED (AS MFG) (ZN B8-3); 0.13 WAS 0.2 (AS MFG) (ZN C6-1); REASON: EASE OF ASSEMBLY OF HEADREST | PH | 08.08.29 |
| A | NEW ISSUE | RF | 04.08.18 |
| REV. | DESCRIPTION | BY | DATE |
| DESIGN | RF | DART AEROSPACE LTD | |
| DRAWN | RF | HAWKESBURY, ONTARIO, CANADA | |
| CHECKED | RF | DRAWING NO. | REV. B |
| MFG. APPR. | RF | D3306 | SHEET 1 OF 3 |
| APPROVED | RF | TITLE | SCALE |
| DE APPR. | RF | COVER ASSEMBLY | NTS |
| DATE | 08.08.29 | COPYRIGHT © 2004 BY DART AEROSPACE LTD THIS DOCUMENT IS PRIVATE AND CONFIDENTIAL AND IS SUPPLIED ON THE EXPRESS CONDITION THAT IT IS NOT TO BE USED FOR ANY PURPOSE OR COMMUNICATED TO ANY OTHER PERSON WITHOUT WRITTEN PERMISSION FROM DART AEROSPACE LTD | |

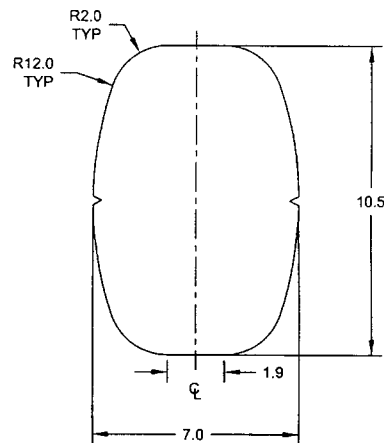
| W/O: | | WORK ORDER CHANGES | | | | | | |
|------|------|--------------------|----|------|-----|-------------------------------------|--------------------------|--|
| DATE | STEP | PROCEDURE CHANGE | By | Date | Qty | Approval Chief Eng / Prod Mgr | Approval QC Inspector | |
| | | | | | | | | |
| | | | | | | | | |

Part No: _____ PAR #: _____ Fault Category: _____ NCR: Yes No DQA: _____ Date: _____

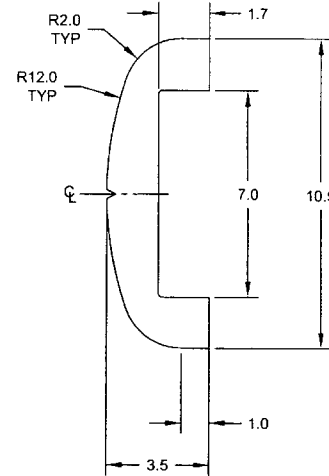
Resolution: _____ Disposition: _____ QA: N/C Closed: _____ Date: _____

| NCR: | | WORK ORDER NON-CONFORMANCE (NCR) | | | | | | |
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| | | | Initial Chief Eng | Action Description Chief Eng | Sign & Date | | | |
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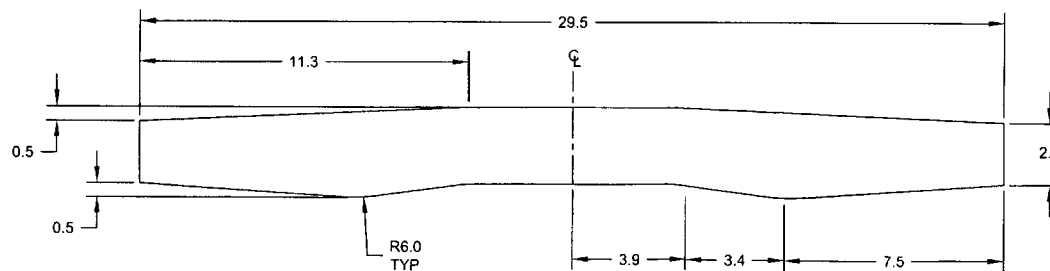
NOTE: Date & initial all entries



D3306-1 TOP



D3306-3 BOTTOM



D3306-5 SIDE

D3306-1/-3/-5 NOTES:

- 1) MATERIAL: AMERBELLE 420/420 56/44 NYLON PACKCLOTH IN DARK DULL GREY (MUST MEET THE BURN TEST REQUIREMENTS OF FAR 29.853a2)
- 2) FINISH: NONE
- 3) TOLERANCES: PER DART QSI 018 UNLESS OTHERWISE NOTED
- 4) UNITS: INCHES UNLESS OTHERWISE NOTED
- 5) BREAK SHARP EDGES: N/A
- 6) IDENTIFICATION: N/A
- 7) WEIGHT: N/A
- 8) POSSIBLE SUPPLIER: AEROTEX INTERIORS INC.



RELEASED
08-10-10

| | | | |
|---|----------|--|--------------|
| DESIGN | IRF | DART AEROSPACE LTD | |
| DRAWN | IRF | HAWKESBURY, ONTARIO, CANADA | |
| CHECKED | | DRAWING NO. | REV. B |
| MFG. APPR. | | D3306 | SHEET 2 OF 3 |
| APPROVED | | TITLE | SCALE |
| DE APPR. | | COVER ASSEMBLY | NTS |
| DATE | 08.08.29 | COPYRIGHT © 2004 BY DART AEROSPACE LTD | |
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| W/O: | | WORK ORDER CHANGES | | | | | | |
|------|------|--------------------|----|------|-----|-------------------------------------|--------------------------|--|
| DATE | STEP | PROCEDURE CHANGE | By | Date | Qty | Approval Chief Eng / Prod Mgr | Approval QC Inspector | |
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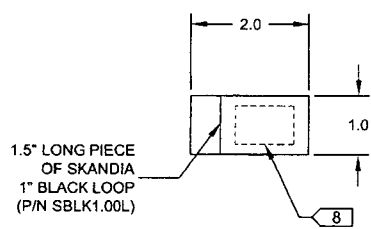
Part No: _____ PAR #: _____ Fault Category: _____ NCR: Yes No DQA: _____ Date: _____

Resolution: _____ Disposition: _____ QA: N/C Closed: _____ Date: _____

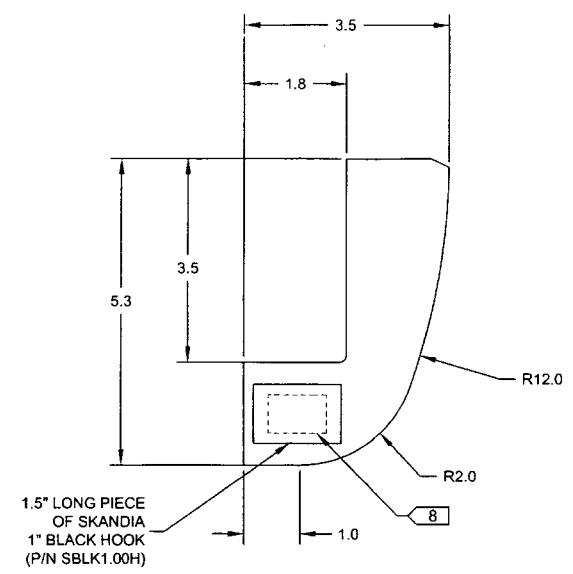
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NOTE: Date & initial all entries

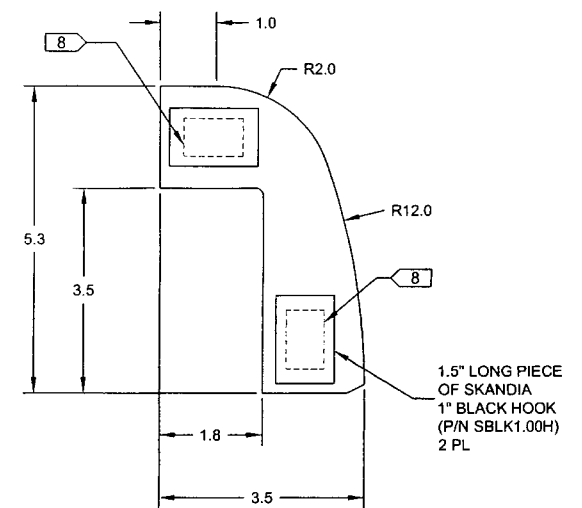
86946



D3306-7 TAB



D3306-9 BOTTOM



D3306-11 BOTTOM

D3306-7/-9/-11 NOTES:

- 1) MATERIAL: AMERBELLE 420/420 56/44 NYLON PACKCLOTH IN DARK DULL GREY (MUST MEET THE BURN TEST REQUIREMENTS OF FAR 29.853a2)
- 2) FINISH: NONE
- 3) TOLERANCES: PER DART QSI 018 UNLESS OTHERWISE NOTED
- 4) UNITS: INCHES UNLESS OTHERWISE NOTED
- 5) BREAK SHARP EDGES: N/A
- 6) IDENTIFICATION: N/A
- 7) WEIGHT: N/A
- 8) THREAD: MIL-VT-295 TYPE II CLASS A, GREY NYLON THREAD, 4-6 STITCHES PER INCH USE 1/2" MIN BACKSTITCH, NO LOOSE THREADS
- 9) POSSIBLE SUPPLIER: AEROTEX INTERIORS INC.

RELEASED
DS-1D-10-11P

| | | | |
|------------|----------|---|--------------|
| DESIGN | RF | DART AEROSPACE LTD | |
| DRAWN | RA | HAWKESBURY, ONTARIO, CANADA | |
| CHECKED | | DRAWING NO. | REV. B |
| MFG. APPR. | | D3306 | SHEET 3 OF 3 |
| APPROVED | | TITLE | SCALE |
| DE APPR. | | COVER ASSEMBLY | NTS |
| DATE | 08.08.29 | <small>COPYRIGHT © 2004 BY DART AEROSPACE LTD THIS DOCUMENT IS PRIVATE AND CONFIDENTIAL AND IS SUPPLIED ON THE EXPRESS CONDITION THAT IT IS NOT TO BE USED FOR ANY PURPOSE OR FOR DISSEMINATION TO ANY OTHER PERSON WITHOUT WRITTEN PERMISSION FROM DART AEROSPACE LTD.</small> | |

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Part No: _____ PAR #: _____ Fault Category: _____ NCR: Yes No DQA: _____ Date: _____

Resolution: _____ Disposition: _____ QA: N/C Closed: _____ Date: _____

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| | | | Initial Chief Eng | Action Description Chief Eng | Sign & Date | | | |
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| | | | | | | | | |

NOTE: Date & initial all entries



151-2340 Pegasus Way NE
Calgary, AB T2E 8M5
PH: 403.295.8770 FX: 403.313.0793
EM: info@aerotex.ca WS: www.aerotex.ca

Packing Slip
RECEIVED AUG 03 2012 Date Packing Slip#
12/07/2012 8768

Ship: Dart Aerospace Ltd.
1270 Aberdeen Street
Hawkesbury, ON K6A 1K7
CANADA

Customer Phone
613.632.5200

Customer Fax
613.632.1053

Ship Via
FEDEX P1

Courier Acct No.
151793240

Bill: Dart Aerospace Ltd.
1270 Aberdeen Street
Hawkesbury, Ontario K6A 1K7
CANADA

Email: PURO ACCT 1-7684382

Ship Date **P.O. No.**

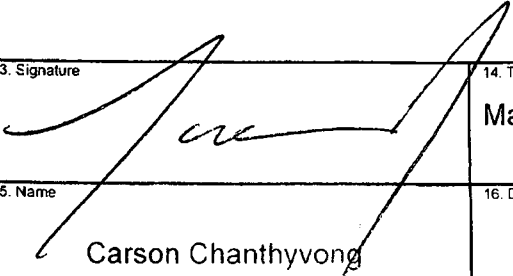
12/07/2012 17409

| Aircraft | Description | Part Number | Qty |
|----------|---|-------------|-----|
| DART | HEAD REST COVER WITH 3 VELCRO CLOSURE AS PER DWG D3306 GST On Sales | D3306-041P | 20 |

Thank you for doing business with Aerotex Interiors!

GST/HST No. 139110308

"your one stop shop for all your aircraft interior needs"
www.aerotex.ca

| | | | | | |
|--|---|--------------------------------------|---------|---------------|--|
| 1. Organization issuing certificate Aerotex Interiors Inc., 24 - 2333 18 Ave NE Calgary, AB T2E 8T6 | | 2. CERTIFICATE OF CONFORMANCE | | | 3. Work Order / Contract / Invoice 8781 |
| 4. Customer Name Dart Aerospace Ltd. 1270 Aberdeen Street Hawkesbury, Ontario K6A 1K7 Canada | | | | | 5. Customer Purchase Order 17420 |
| 6. Item | 7. Description | 8. Part No./Specification | 9. Qty. | 10. Batch No. | 11. Status |
| 1 | Amerbelle Nylon Packcloth in Dark Gull Grey | 420/420 56/44 | NA | 5065 | New |
| 2 | Skandia 1" Hook | SBLK1.00H | NA | 5049 | New |
| 3 | Skandia 1" Loop | SBLK1.00L | NA | 5049 | New |
| 4 | Grey Nylon Thread | MIL-VT-295 TYPE II CL A | NA | 4822 | New |
| 12. Remarks I certify that the materials supplied for the Purchase Order listed above conform to Aerotex Interiors's material/process specification and are in all respects in conformance with the contract requirements. I further certify that items have been fabricated to established specification to confirm with DWG NO. D3306 | | | | | |
| 13. Signature  | | 14. Title Manager | | | |
| 15. Name Carson Chanthvong | | 16. Date 12-07-19 | | | |

NCR: Yes / No

WORK ORDER NON-CONFORMANCE / UPDATE

DQA: _____ Date: _____

QA Closed: _____ Date: _____

| | | | | | | | | | | | | | | | | | | |
|--|---|---|--------------------------------------|------------------------------------|------------------------------------|--------------------------------------|------------------------------------|------------------------------------|--|----------------------------------|--|------------------------------------|--|--------------------------------|------------------------------------|------------------------------------|-----------------------------------|--|
| Work Order: _____ Part No. _____ NCR No. _____ | DISPOSITION Rework <input type="checkbox"/> Scrap <input type="checkbox"/> Use-as-is <input type="checkbox"/> Work Order Update <input type="checkbox"/> | AGAINST DEPARTMENT/PROCESS <table style="width: 100%;"> <tr> <td>Skid-tube <input type="checkbox"/></td> <td>Crosstube <input type="checkbox"/></td> <td>Water Jet <input type="checkbox"/></td> <td>Engineering <input type="checkbox"/></td> </tr> <tr> <td>Machining <input type="checkbox"/></td> <td>Small Fab <input type="checkbox"/></td> <td>Prod. Eng. Coord. <input type="checkbox"/></td> <td>Quality <input type="checkbox"/></td> </tr> <tr> <td>Thermoforming <input type="checkbox"/></td> <td>Finishing <input type="checkbox"/></td> <td>Rec/Store/Packaging <input type="checkbox"/></td> <td>Other <input type="checkbox"/></td> </tr> <tr> <td>Large Fab <input type="checkbox"/></td> <td>Composite <input type="checkbox"/></td> <td>Supplier <input type="checkbox"/></td> <td></td> </tr> </table> | Skid-tube <input type="checkbox"/> | Crosstube <input type="checkbox"/> | Water Jet <input type="checkbox"/> | Engineering <input type="checkbox"/> | Machining <input type="checkbox"/> | Small Fab <input type="checkbox"/> | Prod. Eng. Coord. <input type="checkbox"/> | Quality <input type="checkbox"/> | Thermoforming <input type="checkbox"/> | Finishing <input type="checkbox"/> | Rec/Store/Packaging <input type="checkbox"/> | Other <input type="checkbox"/> | Large Fab <input type="checkbox"/> | Composite <input type="checkbox"/> | Supplier <input type="checkbox"/> | |
| Skid-tube <input type="checkbox"/> | Crosstube <input type="checkbox"/> | Water Jet <input type="checkbox"/> | Engineering <input type="checkbox"/> | | | | | | | | | | | | | | | |
| Machining <input type="checkbox"/> | Small Fab <input type="checkbox"/> | Prod. Eng. Coord. <input type="checkbox"/> | Quality <input type="checkbox"/> | | | | | | | | | | | | | | | |
| Thermoforming <input type="checkbox"/> | Finishing <input type="checkbox"/> | Rec/Store/Packaging <input type="checkbox"/> | Other <input type="checkbox"/> | | | | | | | | | | | | | | | |
| Large Fab <input type="checkbox"/> | Composite <input type="checkbox"/> | Supplier <input type="checkbox"/> | | | | | | | | | | | | | | | | |

| Root Cause | Date | Step | Qty | Description of work order update or Non-conformance | Initial Chief Eng | Action Description | Sign & Date | Verification | QC Inspector |
|---------------|------|------|-----|---|-------------------|--------------------|-------------|--------------|--------------|
| Doc/Data | | | | | | | | | |
| Equip/Tooling | | | | | | | | | |
| Operator | | | | | | | | | |
| Material | | | | | | | | | |
| Setup | | | | | | | | | |
| Other | | | | | | | | | |
| Process | | | | | | | | | |
| Supplier | | | | | | | | | |
| Training | | | | | | | | | |
| Unapproved | | | | | | | | | |

FAULT CATEGORY

| Landing Gear | General | Other |
|---|---|--|
| <input type="checkbox"/> Bending | <input type="checkbox"/> Bend | <input type="checkbox"/> Grain |
| <input type="checkbox"/> Centre Not Concentric to O/S | <input type="checkbox"/> BOM/Route | <input type="checkbox"/> Hardware |
| <input type="checkbox"/> Cracks | <input type="checkbox"/> Broken/Damaged | <input type="checkbox"/> Inspection Incomplete |
| <input type="checkbox"/> Crushed/Crimped | <input type="checkbox"/> Burrs | <input type="checkbox"/> Instructions Incomplete/Unclear |
| <input type="checkbox"/> Cuffs | <input type="checkbox"/> Contamination | <input type="checkbox"/> Maintenance |
| <input type="checkbox"/> Heat Treat | <input type="checkbox"/> Countersink | <input type="checkbox"/> Mislabeled |
| <input type="checkbox"/> Inspection Strip in Tube | <input type="checkbox"/> Cut Too Short | <input type="checkbox"/> Misread |
| <input type="checkbox"/> Ripples in Bend | <input type="checkbox"/> Drill Holes | <input type="checkbox"/> Offset |
| <input type="checkbox"/> Torque Waves in Extrusion | <input type="checkbox"/> Drawing | <input type="checkbox"/> Out of Calibration |
| <input type="checkbox"/> Turning Sequence | <input type="checkbox"/> Finish | <input type="checkbox"/> Out of Sequence |
| <input type="checkbox"/> Wave/Twist in Tube | <input type="checkbox"/> Folio | <input type="checkbox"/> Outside Dimensions |
| | | <input type="checkbox"/> Ovalized |
| | | <input type="checkbox"/> Over/Under tolerance |
| | | <input type="checkbox"/> Part Incorrect |
| | | <input type="checkbox"/> Part Lost/Missing |
| | | <input type="checkbox"/> Part Moved |
| | | <input type="checkbox"/> Positioned Wrong |
| | | <input type="checkbox"/> Power Loss/Surge |
| | | <input type="checkbox"/> Pressure/Forced |
| | | <input type="checkbox"/> Temperature/Cure |
| | | <input type="checkbox"/> Weld |
| | | <input type="checkbox"/> Wrong Stock Pulled |
| | | <input type="checkbox"/> Other |

Aug 10 05 03:54p

Belcoates Inc

817-485-5014

P. 2

AUG 05 2001 WED 15:22 FAX 8608714217

Main Office

THE AMERBELLE Corporation

TRAVIS TEXTILES
AMERBELLE

3016

DYEING • FINISHING • COATING OF SYNTHETIC AND BLEND FABRICS
104 EAST MAIN STREET, P.O. BOX 150, VERNON, CT 06066-0150, TELEPHONE 860-875-3325, FAX 860-875-2335TEST REPORT
LABORATORY QLL 675

| | | | |
|-------------------|-----------------|-------------------|--|
| Customer | TRAVIS TEXTILES | Fabric | 420/420 56/44 NYLON PACKCLOTH |
| Customer Lot No. | 18880 | Specification | MIL-C-7219F Type 3, Class 1, & FAR 25.853B PAGE 1 |
| Amerbelle Lot No. | 60125 | | |
| Color | DARK GULL GREY | Testing Completed | NOVEMBER 28, 2001 |
| Batch Letter | 33579 | | |

| TESTS | RESULT OF SAMPLE UNITS | REQUIREMENTS |
|------------------------------------|------------------------|-------------------------------|
| Fabric Construction (FTM-5050) | 50 | 60 MIN |
| Breakdown | 146 | 45 MIN |
| Shrinkage | | |
| Length - Warp | 34.12" | AS SPECIFIED |
| Length - Filling | | |
| Weight (FTM-5041) oz/sq yd. | AVG. 8.26 | 7.25 MAX. |
| Tensile - Ravel Strip lbs. | | |
| FTM-5104 | | |
| Warp | AVG. 476 | 325 LBS. MIN. |
| Filling | AVG. 394 | 275 LBS. MIN. |
| Tear - Tongue (ASTM-D2261-83) lbs. | | |
| Warp | AVG. 47 | 20 LBS. MIN. |
| Filling | AVG. 45 | 20 LBS. MIN. |
| Colorfastness to Crocking | | |
| FTM-6551 | | |
| Warp | PASS | 3.5 |
| Filling | PASS | 3.5 |
| FAR FAR 25.853 B INITIAL REQUIR. | | |
| Aftertime - Warp, Seconds | PASS | Average not over 15 seconds |
| Aftertime - Filling, Seconds | PASS | Droppings may not continue to |
| Aftertime - Average, Seconds | PASS | falling. |
| FAR FAR 25.853 B INITIAL REQUIR. | | |
| Char Length - Warp, Inches | PASS | Average not over 6 inches |
| Char Length - Filling, Inches | PASS | |
| Char Length - Average, Inches | PASS | |

I certify that the above test results were performed under my supervision in accordance with the specification test requirements and that the reported test results are true, valid and applicable to the samples tested. I further certify that these samples were the only samples tested from the lot of components identified above

Signed *Richard Abella*
Richard Abella, Laboratory Manager

NCR: Yes / No

WORK ORDER NON-CONFORMANCE / UPDATE

DQA: _____ Date: _____

QA Closed: _____ Date: _____

| | | | | | | | | | | | | | | | | | | |
|--|---|---|--------------------------------------|------------------------------------|------------------------------------|--------------------------------------|------------------------------------|------------------------------------|--|----------------------------------|--|------------------------------------|--|--------------------------------|------------------------------------|------------------------------------|-----------------------------------|--|
| Work Order: _____ Part No. _____ NCR No. _____ | DISPOSITION Rework <input type="checkbox"/> Scrap <input type="checkbox"/> Use-as-is <input type="checkbox"/> Work Order Update <input type="checkbox"/> | AGAINST DEPARTMENT/PROCESS <table style="width: 100%;"> <tr> <td>Skid-tube <input type="checkbox"/></td> <td>Crosstube <input type="checkbox"/></td> <td>Water Jet <input type="checkbox"/></td> <td>Engineering <input type="checkbox"/></td> </tr> <tr> <td>Machining <input type="checkbox"/></td> <td>Small Fab <input type="checkbox"/></td> <td>Prod. Eng. Coord. <input type="checkbox"/></td> <td>Quality <input type="checkbox"/></td> </tr> <tr> <td>Thermoforming <input type="checkbox"/></td> <td>Finishing <input type="checkbox"/></td> <td>Rec/Store/Packaging <input type="checkbox"/></td> <td>Other <input type="checkbox"/></td> </tr> <tr> <td>Large Fab <input type="checkbox"/></td> <td>Composite <input type="checkbox"/></td> <td>Supplier <input type="checkbox"/></td> <td></td> </tr> </table> | Skid-tube <input type="checkbox"/> | Crosstube <input type="checkbox"/> | Water Jet <input type="checkbox"/> | Engineering <input type="checkbox"/> | Machining <input type="checkbox"/> | Small Fab <input type="checkbox"/> | Prod. Eng. Coord. <input type="checkbox"/> | Quality <input type="checkbox"/> | Thermoforming <input type="checkbox"/> | Finishing <input type="checkbox"/> | Rec/Store/Packaging <input type="checkbox"/> | Other <input type="checkbox"/> | Large Fab <input type="checkbox"/> | Composite <input type="checkbox"/> | Supplier <input type="checkbox"/> | |
| Skid-tube <input type="checkbox"/> | Crosstube <input type="checkbox"/> | Water Jet <input type="checkbox"/> | Engineering <input type="checkbox"/> | | | | | | | | | | | | | | | |
| Machining <input type="checkbox"/> | Small Fab <input type="checkbox"/> | Prod. Eng. Coord. <input type="checkbox"/> | Quality <input type="checkbox"/> | | | | | | | | | | | | | | | |
| Thermoforming <input type="checkbox"/> | Finishing <input type="checkbox"/> | Rec/Store/Packaging <input type="checkbox"/> | Other <input type="checkbox"/> | | | | | | | | | | | | | | | |
| Large Fab <input type="checkbox"/> | Composite <input type="checkbox"/> | Supplier <input type="checkbox"/> | | | | | | | | | | | | | | | | |

| Root Cause | Date | Step | Qty | Description of work order update or Non-conformance | Initial Chief Eng | Action Description | Sign & Date | Verification | QC Inspector |
|---------------|------|------|-----|---|-------------------|--------------------|-------------|--------------|--------------|
| Doc/Data | | | | | | | | | |
| Equip/Tooling | | | | | | | | | |
| Operator | | | | | | | | | |
| Material | | | | | | | | | |
| Setup | | | | | | | | | |
| Other | | | | | | | | | |
| Process | | | | | | | | | |
| Supplier | | | | | | | | | |
| Training | | | | | | | | | |
| Unapproved | | | | | | | | | |

FAULT CATEGORY

| | | |
|---|---|--|
| Landing Gear <input type="checkbox"/> Bending <input type="checkbox"/> Centre Not Concentric to O/S <input type="checkbox"/> Cracks <input type="checkbox"/> Crushed/Crimped <input type="checkbox"/> Cuffs <input type="checkbox"/> Heat Treat <input type="checkbox"/> Inspection Strip in Tube <input type="checkbox"/> Ripples in Bend <input type="checkbox"/> Torque Waves in Extrusion <input type="checkbox"/> Turning Sequence <input type="checkbox"/> Wave/Twist in Tube | General <input type="checkbox"/> Bend <input type="checkbox"/> BOM/Route <input type="checkbox"/> Broken/Damaged <input type="checkbox"/> Burrs <input type="checkbox"/> Contamination <input type="checkbox"/> Countersink <input type="checkbox"/> Cut Too Short <input type="checkbox"/> Drill Holes <input type="checkbox"/> Drawing <input type="checkbox"/> Finish <input type="checkbox"/> Folio | <input type="checkbox"/> Grain <input type="checkbox"/> Hardware <input type="checkbox"/> Inspection Incomplete <input type="checkbox"/> Instructions Incomplete/Unclear <input type="checkbox"/> Maintenance <input type="checkbox"/> Mislabeled <input type="checkbox"/> Misread <input type="checkbox"/> Offset <input type="checkbox"/> Out of Calibration <input type="checkbox"/> Out of Sequence <input type="checkbox"/> Outside Dimensions <input type="checkbox"/> Ovalized <input type="checkbox"/> Over/Under tolerance <input type="checkbox"/> Part Incorrect <input type="checkbox"/> Part Lost/Missing <input type="checkbox"/> Part Moved <input type="checkbox"/> Positioned Wrong <input type="checkbox"/> Power Loss/Surge <input type="checkbox"/> Pressure/Forced <input type="checkbox"/> Temperature/Cure <input type="checkbox"/> Weld <input type="checkbox"/> Wrong Stock Pulled <input type="checkbox"/> Other |
|---|---|--|



5000 N. Highway 251 ■ Davis Junction, IL 61020
815.393.4600 ■ 815.393.3501 (fax)
www.SkandiaInc.com

| VERTICAL FLAMMABILITY TEST RESULTS 14 CFR Part 25.853 (a) Amdt 25-116 Appendix F Part I (a)(1)(ii) | | Skandia, Inc. WO # 213785-10 Client PO | | |
|--|--------------------------------|---|-------------------------|------------------------------|
| Skandia (Products) 5000 N. Hwy. 251 Davis Junction IL 61020 USA | | Doc ID: 12NW-223246 Test Plan # Rev | | |
| AIRCRAFT OR AIRCRAFT COMPONENT IDENTIFICATION | | | | |
| Make: Stock | Model: N/A | Serial: N/A | Tail: N/A | |
| Conditioning Room Data: Date In: 06/10/2010 Time In: 16:00 Date Out: 06/14/2010 Time Out: 09:03 | | | | |
| SPECIMEN MATERIALS | | | | |
| Skandia, Inc.: 1" BLACK SEW Loop Fastner SABLK1.00L, Lot# 401260-SA | | | | |
| Set | Flame Application (seconds) | Flame Time (seconds) | Burn Length (inches) | Drip Flame Time (seconds) |
| 1 | 12 | 0.0 | 1.9 | 0.0 |
| 2 | 12 | 0.0 | 1.8 | 0.0 |
| 3 | 12 | 0.0 | 2.3 | 0.0 |
| Average: | | 0.0 | 2.0 | 0.0 |
| Vertical (12 second) Burn Test: Average Self-Extinguish time may not exceed 15 seconds. Average Burn Length may not exceed 8 inches. Average Dripping may not exceed 5 seconds after falling. | | | | |
| Comments: | | | | |
| <div style="text-align: right;"><input checked="" type="checkbox"/> Passed <input type="checkbox"/> Failed</div> <p>CERTIFICATION: I certify that after testing these specimens, the above results were obtained in accordance with the procedures and equipment specified by Code of Federal Regulations Title 14 Part 25, revised as of January 1, 2004 and the Aircraft Materials Fire test Handbook dated April, 2000.</p> | | | | |
| Donna J. Parrish -FAA DER WITNESS | | | 06/14/2010 DATE | |

NCR: Yes / No

WORK ORDER NON-CONFORMANCE / UPDATE

DQA: _____ Date: _____

QA Closed: _____ Date: _____

| | | | | | | | | | | | | | | | | | | |
|--|---|---|--------------------------------------|------------------------------------|------------------------------------|--------------------------------------|------------------------------------|------------------------------------|--|----------------------------------|--|------------------------------------|--|--------------------------------|------------------------------------|------------------------------------|-----------------------------------|--|
| Work Order: _____ Part No. _____ NCR No. _____ | DISPOSITION Rework <input type="checkbox"/> Scrap <input type="checkbox"/> Use-as-is <input type="checkbox"/> Work Order Update <input type="checkbox"/> | AGAINST DEPARTMENT/PROCESS <table style="width: 100%;"> <tr> <td>Skid-tube <input type="checkbox"/></td> <td>Crosstube <input type="checkbox"/></td> <td>Water Jet <input type="checkbox"/></td> <td>Engineering <input type="checkbox"/></td> </tr> <tr> <td>Machining <input type="checkbox"/></td> <td>Small Fab <input type="checkbox"/></td> <td>Prod. Eng. Coord. <input type="checkbox"/></td> <td>Quality <input type="checkbox"/></td> </tr> <tr> <td>Thermoforming <input type="checkbox"/></td> <td>Finishing <input type="checkbox"/></td> <td>Rec/Store/Packaging <input type="checkbox"/></td> <td>Other <input type="checkbox"/></td> </tr> <tr> <td>Large Fab <input type="checkbox"/></td> <td>Composite <input type="checkbox"/></td> <td>Supplier <input type="checkbox"/></td> <td></td> </tr> </table> | Skid-tube <input type="checkbox"/> | Crosstube <input type="checkbox"/> | Water Jet <input type="checkbox"/> | Engineering <input type="checkbox"/> | Machining <input type="checkbox"/> | Small Fab <input type="checkbox"/> | Prod. Eng. Coord. <input type="checkbox"/> | Quality <input type="checkbox"/> | Thermoforming <input type="checkbox"/> | Finishing <input type="checkbox"/> | Rec/Store/Packaging <input type="checkbox"/> | Other <input type="checkbox"/> | Large Fab <input type="checkbox"/> | Composite <input type="checkbox"/> | Supplier <input type="checkbox"/> | |
| Skid-tube <input type="checkbox"/> | Crosstube <input type="checkbox"/> | Water Jet <input type="checkbox"/> | Engineering <input type="checkbox"/> | | | | | | | | | | | | | | | |
| Machining <input type="checkbox"/> | Small Fab <input type="checkbox"/> | Prod. Eng. Coord. <input type="checkbox"/> | Quality <input type="checkbox"/> | | | | | | | | | | | | | | | |
| Thermoforming <input type="checkbox"/> | Finishing <input type="checkbox"/> | Rec/Store/Packaging <input type="checkbox"/> | Other <input type="checkbox"/> | | | | | | | | | | | | | | | |
| Large Fab <input type="checkbox"/> | Composite <input type="checkbox"/> | Supplier <input type="checkbox"/> | | | | | | | | | | | | | | | | |

| Root Cause | Date | Step | Qty | Description of work order update or Non-conformance | Initial Chief Eng | Action Description | Sign & Date | Verification | QC Inspector |
|---------------|------|------|-----|---|-------------------|--------------------|-------------|--------------|--------------|
| Doc/Data | | | | | | | | | |
| Equip/Tooling | | | | | | | | | |
| Operator | | | | | | | | | |
| Material | | | | | | | | | |
| Setup | | | | | | | | | |
| Other | | | | | | | | | |
| Process | | | | | | | | | |
| Supplier | | | | | | | | | |
| Training | | | | | | | | | |
| Unapproved | | | | | | | | | |

FAULT CATEGORY

| | | |
|---|---|---|
| Landing Gear <input type="checkbox"/> Bending <input type="checkbox"/> Centre Not Concentric to O/S <input type="checkbox"/> Cracks <input type="checkbox"/> Crushed/Crimped <input type="checkbox"/> Cuffs <input type="checkbox"/> Heat Treat <input type="checkbox"/> Inspection Strip in Tube <input type="checkbox"/> Ripples in Bend <input type="checkbox"/> Torque Waves in Extrusion <input type="checkbox"/> Turning Sequence <input type="checkbox"/> Wave/Twist in Tube | General <input type="checkbox"/> Bend <input type="checkbox"/> BOM/Route <input type="checkbox"/> Broken/Damaged <input type="checkbox"/> Burrs <input type="checkbox"/> Contamination <input type="checkbox"/> Countersink <input type="checkbox"/> Cut Too Short <input type="checkbox"/> Drill Holes <input type="checkbox"/> Drawing <input type="checkbox"/> Finish <input type="checkbox"/> Folio | <input type="checkbox"/> Grain <input type="checkbox"/> Hardware <input type="checkbox"/> Inspection Incomplete <input type="checkbox"/> Instructions Incomplete/Unclear <input type="checkbox"/> Maintenance <input type="checkbox"/> Mislabeled <input type="checkbox"/> Misread <input type="checkbox"/> Offset <input type="checkbox"/> Out of Calibration <input type="checkbox"/> Out of Sequence <input type="checkbox"/> Outside Dimensions |
| | | <input type="checkbox"/> Ovalized <input type="checkbox"/> Over/Under tolerance <input type="checkbox"/> Part Incorrect <input type="checkbox"/> Part Lost/Missing <input type="checkbox"/> Part Moved <input type="checkbox"/> Positioned Wrong <input type="checkbox"/> Power Loss/Surge |
| | | <input type="checkbox"/> Pressure/Forced <input type="checkbox"/> Temperature/Cure <input type="checkbox"/> Weld <input type="checkbox"/> Wrong Stock Pulled <input type="checkbox"/> Other |



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www.skandiainc.com

| VERTICAL FLAMMABILITY TEST RESULTS 14 CFR Part 25.853 (a) Amdt 25-116 Appendix F Part I (a)(1)(ii) | | | | Skandia, Inc. WO # 209825-10 Client PO | |
|--|--------------------------------|-------------------------|-------------------------|---|--|
| Skandia (Products) 5000 N. Hwy. 251 Davis Junction IL 61020 USA | | | | Doc ID: 12NW-218196 Test Plan # Rev | |
| AIRCRAFT OR AIRCRAFT COMPONENT IDENTIFICATION | | | | | |
| Make: Stock | | Model: N/A | | Serial: N/A Tail: N/A | |
| Conditioning Room Data: Date In: 02/25/2010 Time In: 13:10 Date Out: 02/26/2010 Time Out: 14:48 | | | | | |
| SPECIMEN MATERIALS | | | | | |
| Skandia, Inc.: 1" BLACK SEW Hook Fastner SABLK1.00H, Lot# 396427-SA | | | | | |
| Set | Flame Application (seconds) | Flame Time (seconds) | Burn Length (inches) | Drip Flame Time (seconds) | |
| 1 | 12 | 0.0 | 2.4 | 0.0 | |
| 2 | 12 | 0.0 | 2.5 | 0.0 | |
| 3 | 12 | 0.0 | 2.1 | 0.0 | |
| Average: | | 0.0 | 2.3 | 0.0 | |
| Vertical (12 second) Burn Test: Average Self-Extinguish time may not exceed 15 seconds. Average Burn Length may not exceed 8 inches. Average Dripping may not exceed 5 seconds after falling. | | | | | |
| Comments: | | | | | |
| <div style="text-align: right;"><input checked="" type="checkbox"/> Passed <input type="checkbox"/> Failed</div> CERTIFICATION: I certify that after testing these specimens, the above results were obtained in accordance with the procedures and equipment specified by Code of Federal Regulations Title 14 Part 25, revised as of January 1, 2004 and the Aircraft Materials Fire test Handbook dated April, 2000. | | | | | |
| Gary K. Palmer - FAA DER WITNESS | | | | 02/26/2010 DATE | |

NCR: Yes / No

WORK ORDER NON-CONFORMANCE / UPDATE

DQA: _____ Date: _____

QA Closed: _____ Date: _____

| | | | | | | | | | | | | | | | | | | |
|--|---|---|--------------------------------------|------------------------------------|------------------------------------|--------------------------------------|------------------------------------|------------------------------------|--|----------------------------------|--|------------------------------------|--|--------------------------------|------------------------------------|------------------------------------|-----------------------------------|--|
| Work Order: _____ Part No. _____ NCR No. _____ | DISPOSITION Rework <input type="checkbox"/> Scrap <input type="checkbox"/> Use-as-is <input type="checkbox"/> Work Order Update <input type="checkbox"/> | AGAINST DEPARTMENT/PROCESS <table style="width: 100%;"> <tr> <td>Skid-tube <input type="checkbox"/></td> <td>Crosstube <input type="checkbox"/></td> <td>Water Jet <input type="checkbox"/></td> <td>Engineering <input type="checkbox"/></td> </tr> <tr> <td>Machining <input type="checkbox"/></td> <td>Small Fab <input type="checkbox"/></td> <td>Prod. Eng. Coord. <input type="checkbox"/></td> <td>Quality <input type="checkbox"/></td> </tr> <tr> <td>Thermoforming <input type="checkbox"/></td> <td>Finishing <input type="checkbox"/></td> <td>Rec/Store/Packaging <input type="checkbox"/></td> <td>Other <input type="checkbox"/></td> </tr> <tr> <td>Large Fab <input type="checkbox"/></td> <td>Composite <input type="checkbox"/></td> <td>Supplier <input type="checkbox"/></td> <td></td> </tr> </table> | Skid-tube <input type="checkbox"/> | Crosstube <input type="checkbox"/> | Water Jet <input type="checkbox"/> | Engineering <input type="checkbox"/> | Machining <input type="checkbox"/> | Small Fab <input type="checkbox"/> | Prod. Eng. Coord. <input type="checkbox"/> | Quality <input type="checkbox"/> | Thermoforming <input type="checkbox"/> | Finishing <input type="checkbox"/> | Rec/Store/Packaging <input type="checkbox"/> | Other <input type="checkbox"/> | Large Fab <input type="checkbox"/> | Composite <input type="checkbox"/> | Supplier <input type="checkbox"/> | |
| Skid-tube <input type="checkbox"/> | Crosstube <input type="checkbox"/> | Water Jet <input type="checkbox"/> | Engineering <input type="checkbox"/> | | | | | | | | | | | | | | | |
| Machining <input type="checkbox"/> | Small Fab <input type="checkbox"/> | Prod. Eng. Coord. <input type="checkbox"/> | Quality <input type="checkbox"/> | | | | | | | | | | | | | | | |
| Thermoforming <input type="checkbox"/> | Finishing <input type="checkbox"/> | Rec/Store/Packaging <input type="checkbox"/> | Other <input type="checkbox"/> | | | | | | | | | | | | | | | |
| Large Fab <input type="checkbox"/> | Composite <input type="checkbox"/> | Supplier <input type="checkbox"/> | | | | | | | | | | | | | | | | |

| Root Cause | Date | Step | Qty | Description of work order update or Non-conformance | Initial Chief Eng | Action Description | Sign & Date | Verification | QC Inspector |
|--|------|------|-----|---|-------------------|--------------------|-------------|--------------|--------------|
| Doc/Data <input type="checkbox"/> | | | | | | | | | |
| Equip/Tooling <input type="checkbox"/> | | | | | | | | | |
| Operator <input type="checkbox"/> | | | | | | | | | |
| Material <input type="checkbox"/> | | | | | | | | | |
| Setup <input type="checkbox"/> | | | | | | | | | |
| Other <input type="checkbox"/> | | | | | | | | | |
| Process <input type="checkbox"/> | | | | | | | | | |
| Supplier <input type="checkbox"/> | | | | | | | | | |
| Training <input type="checkbox"/> | | | | | | | | | |
| Unapproved <input type="checkbox"/> | | | | | | | | | |

FAULT CATEGORY

| Landing Gear | General | Other |
|---|---|--|
| <input type="checkbox"/> Bending | <input type="checkbox"/> Bend | <input type="checkbox"/> Grain |
| <input type="checkbox"/> Centre Not Concentric to O/S | <input type="checkbox"/> BOM/Route | <input type="checkbox"/> Hardware |
| <input type="checkbox"/> Cracks | <input type="checkbox"/> Broken/Damaged | <input type="checkbox"/> Inspection Incomplete |
| <input type="checkbox"/> Crushed/Crimped | <input type="checkbox"/> Burrs | <input type="checkbox"/> Instructions Incomplete/Unclear |
| <input type="checkbox"/> Cuffs | <input type="checkbox"/> Contamination | <input type="checkbox"/> Maintenance |
| <input type="checkbox"/> Heat Treat | <input type="checkbox"/> Countersink | <input type="checkbox"/> Mislabeled |
| <input type="checkbox"/> Inspection Strip in Tube | <input type="checkbox"/> Cut Too Short | <input type="checkbox"/> Misread |
| <input type="checkbox"/> Ripples in Bend | <input type="checkbox"/> Drill Holes | <input type="checkbox"/> Offset |
| <input type="checkbox"/> Torque Waves in Extrusion | <input type="checkbox"/> Drawing | <input type="checkbox"/> Out of Calibration |
| <input type="checkbox"/> Turning Sequence | <input type="checkbox"/> Finish | <input type="checkbox"/> Out of Sequence |
| <input type="checkbox"/> Wave/Twist in Tube | <input type="checkbox"/> Folio | <input type="checkbox"/> Outside Dimensions |
| | | <input type="checkbox"/> Ovalized |
| | | <input type="checkbox"/> Over/Under tolerance |
| | | <input type="checkbox"/> Part Incorrect |
| | | <input type="checkbox"/> Part Lost/Missing |
| | | <input type="checkbox"/> Part Moved |
| | | <input type="checkbox"/> Positioned Wrong |
| | | <input type="checkbox"/> Power Loss/Surge |
| | | <input type="checkbox"/> Pressure/Forced |
| | | <input type="checkbox"/> Temperature/Cure |
| | | <input type="checkbox"/> Weld |
| | | <input type="checkbox"/> Wrong Stock Pulled |
| | | <input type="checkbox"/> Other |



AEROTEX

151-2340 Pegasus Way NE
Calgary, AB T2E 8M5
Tel: 403.295.8770 FX: 403.313.0793
EM: info@aerotex.ca WS: www.aerotex.ca

Ship:

Dart Aerospace Ltd.
1270 Aberdeen Street
Hawkesbury, ON K6A 1K7
CANADA

Customer Phone:
613.632.5200

Carrier:
FEDEX P1

Customer Fax:
613.632.1053

Courier Acct No.:
151793240

Packing Slip

Date Packing Slip

7/19/2012 8781

Bill:

Dart Aerospace Ltd.
1270 Aberdeen Street
Hawkesbury, Ontario K6A 1K7
CANADA

Email: PURO ACCT 1-7684382

Ship Date: 7/12/2012

17420

| Quantity | Description | Part Number | 20 |
|----------|---|-------------|----|
| DART | HEAD REST CUSHION AS PER DWG. D3305 GST On Sales | D3305-1P | |

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GST/HST No.

139110308

"your one stop shop for all your aircraft interior needs"
www.aerotex.ca

NCR: Yes / No

WORK ORDER NON-CONFORMANCE / UPDATE

DQA: _____ Date: _____

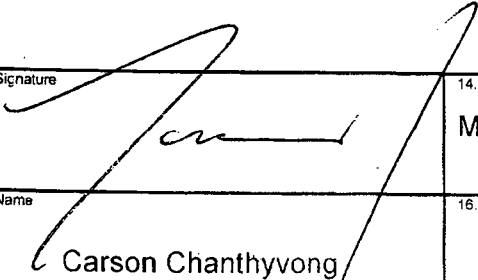
QA Closed: _____ Date: _____

| | | | | | | | | | | | | | | | | | | |
|--|---|---|--------------------------------------|------------------------------------|------------------------------------|--------------------------------------|------------------------------------|------------------------------------|--|----------------------------------|--|------------------------------------|--|--------------------------------|------------------------------------|------------------------------------|-----------------------------------|--|
| Work Order: _____ Part No. _____ NCR No. _____ | DISPOSITION Rework <input type="checkbox"/> Scrap <input type="checkbox"/> Use-as-is <input type="checkbox"/> Work Order Update <input type="checkbox"/> | AGAINST DEPARTMENT/PROCESS <table style="width: 100%;"> <tr> <td>Skid-tube <input type="checkbox"/></td> <td>Crosstube <input type="checkbox"/></td> <td>Water Jet <input type="checkbox"/></td> <td>Engineering <input type="checkbox"/></td> </tr> <tr> <td>Machining <input type="checkbox"/></td> <td>Small Fab <input type="checkbox"/></td> <td>Prod. Eng. Coord. <input type="checkbox"/></td> <td>Quality <input type="checkbox"/></td> </tr> <tr> <td>Thermoforming <input type="checkbox"/></td> <td>Finishing <input type="checkbox"/></td> <td>Rec/Store/Packaging <input type="checkbox"/></td> <td>Other <input type="checkbox"/></td> </tr> <tr> <td>Large Fab <input type="checkbox"/></td> <td>Composite <input type="checkbox"/></td> <td>Supplier <input type="checkbox"/></td> <td></td> </tr> </table> | Skid-tube <input type="checkbox"/> | Crosstube <input type="checkbox"/> | Water Jet <input type="checkbox"/> | Engineering <input type="checkbox"/> | Machining <input type="checkbox"/> | Small Fab <input type="checkbox"/> | Prod. Eng. Coord. <input type="checkbox"/> | Quality <input type="checkbox"/> | Thermoforming <input type="checkbox"/> | Finishing <input type="checkbox"/> | Rec/Store/Packaging <input type="checkbox"/> | Other <input type="checkbox"/> | Large Fab <input type="checkbox"/> | Composite <input type="checkbox"/> | Supplier <input type="checkbox"/> | |
| Skid-tube <input type="checkbox"/> | Crosstube <input type="checkbox"/> | Water Jet <input type="checkbox"/> | Engineering <input type="checkbox"/> | | | | | | | | | | | | | | | |
| Machining <input type="checkbox"/> | Small Fab <input type="checkbox"/> | Prod. Eng. Coord. <input type="checkbox"/> | Quality <input type="checkbox"/> | | | | | | | | | | | | | | | |
| Thermoforming <input type="checkbox"/> | Finishing <input type="checkbox"/> | Rec/Store/Packaging <input type="checkbox"/> | Other <input type="checkbox"/> | | | | | | | | | | | | | | | |
| Large Fab <input type="checkbox"/> | Composite <input type="checkbox"/> | Supplier <input type="checkbox"/> | | | | | | | | | | | | | | | | |

| Root Cause | Date | Step | Qty | Description of work order update or Non-conformance | Initial Chief Eng | Action Description | Sign & Date | Verification | QC Inspector |
|---------------|------|------|-----|---|-------------------|--------------------|-------------|--------------|--------------|
| Doc/Data | | | | | | | | | |
| Equip/Tooling | | | | | | | | | |
| Operator | | | | | | | | | |
| Material | | | | | | | | | |
| Setup | | | | | | | | | |
| Other | | | | | | | | | |
| Process | | | | | | | | | |
| Supplier | | | | | | | | | |
| Training | | | | | | | | | |
| Unapproved | | | | | | | | | |

FAULT CATEGORY

| | | |
|---|---|--|
| Landing Gear <input type="checkbox"/> Bending <input type="checkbox"/> Centre Not Concentric to O/S <input type="checkbox"/> Cracks <input type="checkbox"/> Crushed/Crimped <input type="checkbox"/> Cuffs <input type="checkbox"/> Heat Treat <input type="checkbox"/> Inspection Strip in Tube <input type="checkbox"/> Ripples in Bend <input type="checkbox"/> Torque Waves in Extrusion <input type="checkbox"/> Turning Sequence <input type="checkbox"/> Wave/Twist in Tube | General <input type="checkbox"/> Bend <input type="checkbox"/> BOM/Route <input type="checkbox"/> Broken/Damaged <input type="checkbox"/> Burrs <input type="checkbox"/> Contamination <input type="checkbox"/> Countersink <input type="checkbox"/> Cut Too Short <input type="checkbox"/> Drill Holes <input type="checkbox"/> Drawing <input type="checkbox"/> Finish <input type="checkbox"/> Folio | <input type="checkbox"/> Grain <input type="checkbox"/> Hardware <input type="checkbox"/> Inspection Incomplete <input type="checkbox"/> Instructions Incomplete/Unclear <input type="checkbox"/> Maintenance <input type="checkbox"/> Mislabeled <input type="checkbox"/> Misread <input type="checkbox"/> Offset <input type="checkbox"/> Out of Calibration <input type="checkbox"/> Out of Sequence <input type="checkbox"/> Outside Dimensions <input type="checkbox"/> Ovalized <input type="checkbox"/> Over/Under tolerance <input type="checkbox"/> Part Incorrect <input type="checkbox"/> Part Lost/Missing <input type="checkbox"/> Part Moved <input type="checkbox"/> Positioned Wrong <input type="checkbox"/> Power Loss/Surge <input type="checkbox"/> Pressure/Forced <input type="checkbox"/> Temperature/Cure <input type="checkbox"/> Weld <input type="checkbox"/> Wrong Stock Pulled <input type="checkbox"/> Other |
|---|---|--|

| | | | | | | |
|--|---|--------------------------------------|---------------|-----------------------|--|--|
| 1. Organization issuing certificate. Aerotex Interiors Inc., 24 - 2333 18 Ave NE Calgary, AB T2E 8T6 | | 2. CERTIFICATE OF CONFORMANCE | | | 3. Work Order / Contract / Invoice 8781 | |
| 4. Customer Name Dart Aerospace Ltd. 1270 Aberdeen Street Hawkesbury, Ontario K6A 1K7 Canada | | | | | 5. Customer Purchase Order 17420 | |
| 6. Item 1 | 7. Description Polyfoam DAS 16 283 7/19/12 | 8. Part No./Specification HR150 | 9. Qty. 10 | 10. Batch No. 5033 | 11. Status NEW | |
| 12. Remarks I certify that the materials supplied for the Purchase Order listed above conform to Aerotex Interiors's material/process specification and are in all respects in conformance with the contract requirements. I further certify that items have been fabricated to established specification to confirm with DWG NO. D3305 | | | | | | |
| 13. Signature  | | 14. Title Manager | | | | |
| 15. Name Carson Chanthvong | | 16. Date July 19, 2012 | | | | |

NCR: Yes / No

WORK ORDER NON-CONFORMANCE / UPDATE

DQA: _____ Date: _____

QA Closed: _____ Date: _____

| | | | | | | | | | | | | | | | | | | | | | | | | | | | |
|--|------------------------------------|--|--------------------------------------|---|-------------------|--|-------------|--------------|--------------|--|--|------------------------------------|------------------------------------|------------------------------------|--------------------------------------|------------------------------------|------------------------------------|--|----------------------------------|--|------------------------------------|--|--------------------------------|------------------------------------|------------------------------------|-----------------------------------|--|
| Work Order: _____ Part No. _____ NCR No. _____ | | | | DISPOSITION Rework <input type="checkbox"/> Scrap <input type="checkbox"/> Use-as-is <input type="checkbox"/> Work Order Update <input type="checkbox"/> | | AGAINST DEPARTMENT/PROCESS <table style="width:100%; border: none;"> <tr> <td style="width: 25%;">Skid-tube <input type="checkbox"/></td> <td style="width: 25%;">Crosstube <input type="checkbox"/></td> <td style="width: 25%;">Water Jet <input type="checkbox"/></td> <td style="width: 25%;">Engineering <input type="checkbox"/></td> </tr> <tr> <td>Machining <input type="checkbox"/></td> <td>Small Fab <input type="checkbox"/></td> <td>Prod. Eng. Coord. <input type="checkbox"/></td> <td>Quality <input type="checkbox"/></td> </tr> <tr> <td>Thermoforming <input type="checkbox"/></td> <td>Finishing <input type="checkbox"/></td> <td>Rec/Store/Packaging <input type="checkbox"/></td> <td>Other <input type="checkbox"/></td> </tr> <tr> <td>Large Fab <input type="checkbox"/></td> <td>Composite <input type="checkbox"/></td> <td>Supplier <input type="checkbox"/></td> <td></td> </tr> </table> | | | | | | Skid-tube <input type="checkbox"/> | Crosstube <input type="checkbox"/> | Water Jet <input type="checkbox"/> | Engineering <input type="checkbox"/> | Machining <input type="checkbox"/> | Small Fab <input type="checkbox"/> | Prod. Eng. Coord. <input type="checkbox"/> | Quality <input type="checkbox"/> | Thermoforming <input type="checkbox"/> | Finishing <input type="checkbox"/> | Rec/Store/Packaging <input type="checkbox"/> | Other <input type="checkbox"/> | Large Fab <input type="checkbox"/> | Composite <input type="checkbox"/> | Supplier <input type="checkbox"/> | |
| Skid-tube <input type="checkbox"/> | Crosstube <input type="checkbox"/> | Water Jet <input type="checkbox"/> | Engineering <input type="checkbox"/> | | | | | | | | | | | | | | | | | | | | | | | | |
| Machining <input type="checkbox"/> | Small Fab <input type="checkbox"/> | Prod. Eng. Coord. <input type="checkbox"/> | Quality <input type="checkbox"/> | | | | | | | | | | | | | | | | | | | | | | | | |
| Thermoforming <input type="checkbox"/> | Finishing <input type="checkbox"/> | Rec/Store/Packaging <input type="checkbox"/> | Other <input type="checkbox"/> | | | | | | | | | | | | | | | | | | | | | | | | |
| Large Fab <input type="checkbox"/> | Composite <input type="checkbox"/> | Supplier <input type="checkbox"/> | | | | | | | | | | | | | | | | | | | | | | | | | |
| Root Cause | Date | Step | Qty | Description of work order update or Non-conformance | Initial Chief Eng | Action Description | Sign & Date | Verification | QC Inspector | | | | | | | | | | | | | | | | | | |
| Doc/Data <input type="checkbox"/> | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Equip/Tooling <input type="checkbox"/> | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Operator <input type="checkbox"/> | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Material <input type="checkbox"/> | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Setup <input type="checkbox"/> | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Other <input type="checkbox"/> | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Process <input type="checkbox"/> | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Supplier <input type="checkbox"/> | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Training <input type="checkbox"/> | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Unapproved <input type="checkbox"/> | | | | | | | | | | | | | | | | | | | | | | | | | | | |

| FAULT CATEGORY | | | | | | | | | | | | |
|--|--|--|---|--|--|--|--|--|--|--|---|--|
| Landing Gear <input type="checkbox"/> Bending <input type="checkbox"/> Centre Not Concentric to O/S <input type="checkbox"/> Cracks <input type="checkbox"/> Crushed/Crimped. <input type="checkbox"/> Cuffs <input type="checkbox"/> Heat Treat <input type="checkbox"/> Inspection Strip in Tube <input type="checkbox"/> Ripples in Bend <input type="checkbox"/> Torque Waves in Extrusion <input type="checkbox"/> Turning Sequence <input type="checkbox"/> Wave/Twist in Tube | | | General <input type="checkbox"/> Bend <input type="checkbox"/> BOM/Route <input type="checkbox"/> Broken/Damaged <input type="checkbox"/> Burrs <input type="checkbox"/> Contamination <input type="checkbox"/> Countersink <input type="checkbox"/> Cut Too Short <input type="checkbox"/> Drill Holes <input type="checkbox"/> Drawing <input type="checkbox"/> Finish <input type="checkbox"/> Folio | | | <input type="checkbox"/> Grain <input type="checkbox"/> Hardware <input type="checkbox"/> Inspection Incomplete <input type="checkbox"/> Instructions Incomplete/Unclear <input type="checkbox"/> Maintenance <input type="checkbox"/> Mislabelled <input type="checkbox"/> Misread <input type="checkbox"/> Offset <input type="checkbox"/> Out of Calibration <input type="checkbox"/> Out of Sequence <input type="checkbox"/> Outside Dimensions | | | <input type="checkbox"/> Ovalized <input type="checkbox"/> Over/Under tolerance <input type="checkbox"/> Part Incorrect <input type="checkbox"/> Part Lost/Missing <input type="checkbox"/> Part Moved <input type="checkbox"/> Positioned Wrong <input type="checkbox"/> Power Loss/Surge | | <input type="checkbox"/> Pressure/Forced <input type="checkbox"/> Temperature/Cure <input type="checkbox"/> Weld <input type="checkbox"/> Wrong Stock Pulled <input type="checkbox"/> Other | |



SKANDIA

5000 N. Highway 251 ■ Davis Junction, IL 61020
815.393.4600 ■ 800.945.7135
www.SkandiaInc.com

Client: Skandia (Products)
5000 N. Hwy. 251
Davis Junction IL 61020 USA

WO #: 177027-08
Date: 02/19/08
Test Plan #:
PO #:

Aircraft:
Stock

S.N: NA

Test ID #: 12NW-93054

VERTICAL FLAMMABILITY TEST RESULTS

14 CFR Part 25.853 (a) Amdt 25-116 Appendix F Part I (a)(1)(ii)

Conditioning Room: Time In: 02/18/08 2:30PM Time Out: 02/19/08 3:21PM

Specimen: Skandia, Inc.: HR Polyurethane Foam 150 ILD 1-2", Lot #02118-11150

| Flame Application (seconds) | Flame Time (seconds) | Burn Length (inches) | Dripping (seconds) |
|-----------------------------|----------------------|----------------------|--------------------|
| 12 | 0.0 | 3.2 | 0.0 |
| 12 | 0.0 | 3.6 | 0.0 |
| 12 | 0.0 | 3.1 | 0.0 |
| Average: | 0.0 | 3.3 | 0.0 |


Comments:

Vertical 12 sec. Burn Test: Average Self-Extinguish time may not exceed 15 sec. Average Burn Length may not exceed 8". Average Dripping may not exceed 5 sec. after falling.

Passed: ☒ X

Failed: ☐

Signed:


Carin Demus

NCR: Yes / No

WORK ORDER NON-CONFORMANCE / UPDATE

DQA: _____ Date: _____

QA Closed: _____ Date: _____

| | | | | | | | | | | | | |
|---|------|------|---|--|-------------------|---|-------------|--------------|--|--|---|--|
| Work Order: _____ Part No. _____ NCR No. _____ | | | | DISPOSITION <div style="display: flex; justify-content: space-around;"> <div> Rework <input type="checkbox"/> Scrap <input type="checkbox"/> Use-as-is <input type="checkbox"/> Work Order Update <input type="checkbox"/> </div> <div> Skid-tube <input type="checkbox"/> Machining <input type="checkbox"/> Thermoforming <input type="checkbox"/> Large Fab <input type="checkbox"/> </div> <div> Crosstube <input type="checkbox"/> Small Fab <input type="checkbox"/> Finishing <input type="checkbox"/> Composite <input type="checkbox"/> </div> <div> Water Jet <input type="checkbox"/> Prod. Eng. Coord. <input type="checkbox"/> Rec/Store/Packaging <input type="checkbox"/> Supplier <input type="checkbox"/> </div> <div> Engineering <input type="checkbox"/> Quality <input type="checkbox"/> Other <input type="checkbox"/> </div> </div> | | AGAINST DEPARTMENT/PROCESS | | | | | | |
| Root Cause | Date | Step | Qty | Description of work order update or Non-conformance | Initial Chief Eng | Action Description | Sign & Date | Verification | QC Inspector | | | |
| Doc/Data | | | | | | | | | | | | |
| Equip/Tooling | | | | | | | | | | | | |
| Operator | | | | | | | | | | | | |
| Material | | | | | | | | | | | | |
| Setup | | | | | | | | | | | | |
| Other | | | | | | | | | | | | |
| Process | | | | | | | | | | | | |
| Supplier | | | | | | | | | | | | |
| Training | | | | | | | | | | | | |
| Unapproved | | | | | | | | | | | | |
| FAULT CATEGORY | | | | | | | | | | | | |
| Landing Gear <input type="checkbox"/> Bending <input type="checkbox"/> Centre Not Concentric to O/S <input type="checkbox"/> Cracks <input type="checkbox"/> Crushed/Crimped <input type="checkbox"/> Cuffs <input type="checkbox"/> Heat Treat <input type="checkbox"/> Inspection Strip in Tube <input type="checkbox"/> Ripples in Bend <input type="checkbox"/> Torque Waves in Extrusion <input type="checkbox"/> Turning Sequence <input type="checkbox"/> Wave/Twist in Tube | | | General <input type="checkbox"/> Bend <input type="checkbox"/> BOM/Route <input type="checkbox"/> Broken/Damaged <input type="checkbox"/> Burrs <input type="checkbox"/> Contamination <input type="checkbox"/> Countersink <input type="checkbox"/> Cut Too Short <input type="checkbox"/> Drill Holes <input type="checkbox"/> Drawing <input type="checkbox"/> Finish <input type="checkbox"/> Folio | | | <input type="checkbox"/> Grain <input type="checkbox"/> Hardware <input type="checkbox"/> Inspection Incomplete <input type="checkbox"/> Instructions Incomplete/Unclear <input type="checkbox"/> Maintenance <input type="checkbox"/> Mislabeled <input type="checkbox"/> Misread <input type="checkbox"/> Offset <input type="checkbox"/> Out of Calibration <input type="checkbox"/> Out of Sequence <input type="checkbox"/> Outside Dimensions | | | <input type="checkbox"/> Ovalized <input type="checkbox"/> Over/Under tolerance <input type="checkbox"/> Part Incorrect <input type="checkbox"/> Part Lost/Missing <input type="checkbox"/> Part Moved <input type="checkbox"/> Positioned Wrong <input type="checkbox"/> Power Loss/Surge | | <input type="checkbox"/> Pressure/Forced <input type="checkbox"/> Temperature/Cure <input type="checkbox"/> Weld <input type="checkbox"/> Wrong Stock Pulled <input type="checkbox"/> Other | |